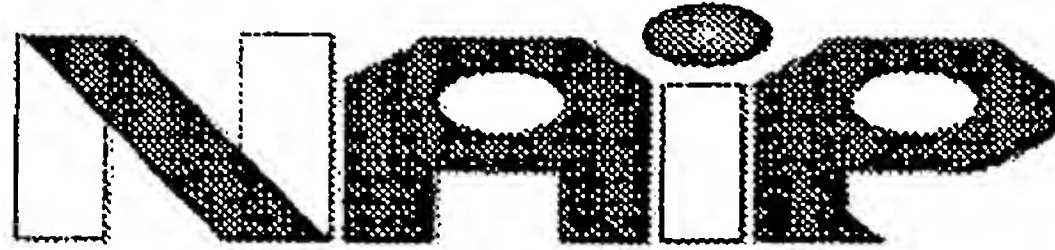


RECEIVED
CENTRAL FAX CENTER

AUG 24 2005



**North America
Intellectual Property corporation**

P.O. BOX 506, Merrifield, VA 22116, U.S.A.

Voice Mail: 302-729-1562 FAX:806-498-6673 e-mail:winstonhsu@naipo.com

FAX TO : NGUYEN, LINH V

ART UNIT: 2819

TEL : (571) 272-1810

FAX: (571) 273-8300

FROM : Winston Hsu, PATENT AGENT, REG. NO. : 41,526

SERIAL NO. : 10/709,198

ATTORNEY DOCKET NO.: REAP0009USA4

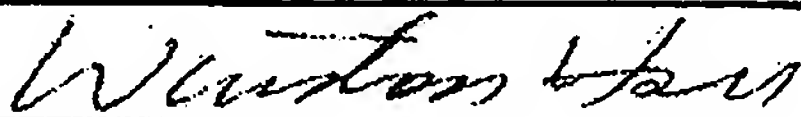
SUBJECT: Authorization to Act in a Representative Capacity Form

TOTAL PAGES : 2 PAGES (INCLUDING COVER PAGE)

Winston Hsu AUG 24 2005

Sample Form (09-04)

AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY

In re Application of: Ying-Yao Lin; Tung-Ming Su; Chao-Cheng Lee					
Application No. 10/709,198					
Filed: 04/20/2004					
Title: LINEAR-IN-DECIBEL VARIABLE GAIN AMPLIFIER					
Attorney Docket No. REAP0009USA4	Art Unit: 2819				
<p>The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:</p> <table border="1"><thead><tr><th>Name</th><th>Registration Number</th></tr></thead><tbody><tr><td>Scott Margo</td><td>56,277</td></tr></tbody></table>		Name	Registration Number	Scott Margo	56,277
Name	Registration Number				
Scott Margo	56,277				
<p>This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does not have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.</p>					
SIGNATURE of Practitioner of Record					
Signature 	Date AUG 24 2005				
Name Winston Hsu	Registration No., if applicable 41,526				
Telephone 302-729-1562					

This form offers a sample or suggested format for an authorization for an agent. See MPEP § 713.05 for more information. This sample form is not an OMB officially approved form.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.